

<b>Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series</b>  SUBSTANCE ABUSE TREATMENT MANUAL	<b>SUBCHAPTER NUMBER AND TITLE</b> 6 SERVICE CODES AND DESCRIPTIONS		<b>PAGE</b> 6-1
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## 601 Service Codes and Descriptions

### Service

Code    Modifier    Service Description

#### **Inpatient Services**

H0011		Alcohol and/or drug services acute detoxification (residential addiction program inpatient) (Level III-A)
H0010		Alcohol and/or drug services sub-acute detoxification (residential addiction program inpatient) (Level III-B) (under 21 only)
H0010	52	Alcohol and/or drug services sub-acute detoxification (residential addiction program inpatient) (reduced services) (Level III-C) (under 21 only)

#### **Methadone Services**

H0020		Alcohol and/or drug services methadone administration and/or service (provision of the drug by a licensed program) (dose only visit)
H0020	TF	Alcohol and/or drug services methadone administration and/or service (provision of the drug by a licensed program) (intermediate level of care) (per 30-minute unit, two units maximum per session) (individual counseling)
H0020	HR	Alcohol and/or drug services methadone administration and/or service (provision of the drug by a licensed program) (family/couple with client present) (per 30-minute unit, two units maximum per session)
H0020	HQ	Alcohol and/or drug services methadone administration and/or service (provision of the drug by a licensed program) (group setting) (per 45-minute unit, two units maximum per session required)

#### **Outpatient Services**

90882	HF	Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions (substance abuse program) (case consultation) (per 30-minute unit two units maximum per session)
97780	HF	Acupuncture, one or more needles, without electrical stimulation (substance abuse program) (per 60-minute unit) (I.C.)
H0004		Behavioral health counseling and therapy, per 15 minutes (individual counseling) (four units maximum) (per session)
H0005		Alcohol and/or drug services group counseling by a clinician (per 45-minute unit) (two units maximum)
T1006		Alcohol and/or substance abuse services family/couple counseling (per 30-minute unit, two units maximum per session)

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601 Service Codes and Descriptions (cont.)

Service

Code   Modifier   Service Description

**Enhanced Inpatient Detoxification Services for Pregnant Recipients**

H0011   HD   Alcohol and/or drug services acute detoxification (residential addiction program inpatient) (pregnant/parenting women's program) (Level III-A)

**Intensive Outpatient Detoxification Services for Pregnant Recipients**

H0004   HD   Behavioral health counseling and therapy, per 15 minutes (pregnant/parenting women's program) (individual) (four units maximum per day)

T1006   HD   Alcohol and/or substance abuse services family/couple counseling (pregnant/parenting women's program) (per 30-minute unit) (two units maximum per day)

H0005   HD   Alcohol and/or drug services group counseling by a clinician (pregnant/parenting women's program) (per 45-minute unit) (two units maximum per day)

H0006   HD   Alcohol and/or drug services case management (pregnant/parenting women's program) (per 15 minute unit) (four units maximum per day)

**Day Treatment Program for Pregnant Recipients**

H1005   Prenatal care, at-risk enhanced service package (includes H1001-H1004) (prenatal care, at-risk enhanced service antepartum management/care coordination/education/follow-up home visit) (individual counseling) (per one hour unit, one unit maximum per day)

H1005   HQ   Prenatal care, at-risk enhanced service package (includes H1001-H1004) (group setting) (prenatal care, at-risk enhanced service antepartum management/care coordination/education/follow-up home visit) (per four hour unit) (one unit maximum per day)